

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 019941-000620US

First Inventor Atushi Kajiyama

Title QUICK DISINTEGRATING TABLET IN BUCCAL CAVITY AND MANUFACTURING METHOD THEREOF

Express Mail Label No. EV 338472405 US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning design patent application contents.</small>		ADDRESS TO <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or <small>Computer Program (Appendix)</small>	
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 30]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper number of pages c. <input type="checkbox"/> Statements verifying identity of above copies	
ACCOMPANYING APPLICATIONS PARTS			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>			
11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)			
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations			
13. <input checked="" type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>			
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent			
17. <input type="checkbox"/> Other:			

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No: 09/896,820

Prior application information: Examiner Humera N. Sheikh

Art Unit: 1615

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number		20350		OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City	State		Zip Code		
Country	Telephone		Fax		

Name (Print/Type)	Joseph R. Snyder	Registration No. (Attorney/Agent)	39,381
Signature	<i>Joseph R. Snyder</i>		Date September 17, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450. 60035068 v1

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22264 U.S. PTO
 10/66707
 09/18/03

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 750)

Complete if Known

Application Number	09/896,820 (Parent)
Filing Date	
First Named Inventor	Atushi Kajiyama
Examiner Name	Humera N. Sheikh
Art Unit	1615 (Parent)
Attorney Docket No.	019941-000620US

METHOD OF PAYMENT (check all that apply)

Check Credit Card MoneyOrder Other None

Deposit Account:

Deposit Account Number

20-1430

Deposit Account Name

Townsend and Townsend and Crew LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
- Charge any additional fee(s) during the pendency of this application
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	750
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$750)	
1. BASIC FILING FEE			
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 280	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$0)	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	18 -20** = 0	X\$18 = \$0	
Independent Claims	3 -3** = 0	X\$84 = \$0	
Multiple Dependent	X [] = []		
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1807 50	1807 50	Petitions to the Commissioner	
1806 180	1806 180	Petitions related to provisional applications	
8021 40	8021 40	Submission of Information Disclosure Stmt	
1809 750	1809 375	Recording each patent assignment per property (times number of properties)	
1810 750	1810 375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1801 750	1801 375	For each additional invention to be examined (37 CFR § 1.129(b))	
1802 900	1802 900	Request for Continued Examination (RCE)	
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

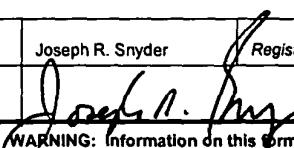
(\$)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Joseph R. Snyder	Registration No. (Attorney/Agent)	39,381	Telephone	925-472-5000
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Signature		Date	September 17, 2003
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